

2006 Delmarva Wetlands Conference Registration Form



October 11th and 12th
Sheraton Dover Hotel
1570 North DuPont Highway
Dover DE 19901



Name : _____
First Middle Initial Last

Employer/Affiliation: _____

Employer's Address : _____

City State Zip Code

Work Phone : _____ Fax: _____

Email : _____

REGISTRATION

Registration: Received before September 15th

____ Regular Registration - \$ 60

____ Student Registration - \$ 20

Late Registration: Received after September 15th

____ Late registration - \$ 100

Field trips (see program for detail)
(Please rank your top two choices)

____ Northern Restoration Tour

____ Central Restoration Tour

____ Natural Diversity Tour

____ Christina Riverfront

Lunch Preference on field trip

____ Ham ____ Vegetarian

____ Turkey

PAYMENT

Mail or fax this form and payment to:

Evan Rehm

DNREC Division of Water Resources

820 Silver Lake Blvd. Suite 220

Dover, DE 19904

Fax: (302) 739-6140

Phone: (302) 739-9939

____ Check (Make checks payable to: State of Delaware)

____ State IV (Delaware state employees only): Please provide Line of Coding

____ Credit Card (Visa ____ MC ____ Discover ____) Card # _____

Security Code (last 3 digits found on the card's signature panel): _____

Exp. Date _____

Refund Policy: Registration fee (minus \$15 processing fee) if written request is received before Sept. 15th.

No refunds given after Sept. 15th.